

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

* 04-191

Louise H. Renne
 Renne Sloan Holtzman & Sakai
 50 California St.
 Suite 2100
 San Francisco, CA 94111

2. Article Number (Copy from service label)

7003 1010 0002 4028 2983

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

07-05

C. Signature

X

MLH

M ALICE

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

DOCKET NO. 04-191

8203

CERTIFIED
MAIL

*04-191

Louise H. Renne
 Renne Sloan Holtzman & Sakai
 50 California St.
 Suite 2100
 San Francisco, CA 94111

ORDER DATED
7/29/05
FCC 05M35
MIMEOGRAPH NO.

2005
REQUESTED

C. R. R. NO.

Y.....